STATE OF HAWAII — DEPARTMENT OF TAXATION

FORM **N-66**

Real Estate Mortgage Investment Conduit Income Tax Return

(R	EV. 1995)		te Instructions.						
	Name	ame				A Federal Employer I.D. No.			
Type or	Number an	d street (P. O. Box number if mail is not delivered to street	B Date	B Date REMIC started					
Print	City or tow	n, state, and ZIP code	C Ente	C Enter total assets at end of tax year					
D C	heck applicabl	e boxes; (1) ☐ Final return	(2) Change in address		Amended	l return			
Section	on I. — Co	omputation of Taxable Income or Net Lo	DSS	E Haw	raii G.E./Use	I.D. No.			
		Income — excluding amounts	from prohibited	d transactio	ns				
1	Tavahle intere	st			1				
							+		
							+		
		(or loss) (attach Schedule D-1)							
5	Other income	(attach schedule)			. 5				
6	Total income	(or loss) (add lines 1 through 5)			. 6				
	Total moomo	Deductions — excluding amou							
	Salaries and wages						_		
8 9							+		
	· · · · · · · · · · · · · · · · · · ·						+		
							+		
13	·						1		
					14				
14	14 Total deductions (add lines 7 through 13)						_		
15	15 Taxable income (net loss) (line 6 less line 14)								
Please Sign Here	and backet	DECLARATION I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statements) has been examined by me and, to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.							
		Signature	Date	Date					
Paid	Preparer's Signature		Check if self-employed	Preparer's social security number					
Prepa Use O	nly if self-emp	Firm's name (or yours				E.I. No. >			
	address		ZIP CODE	ZIP CODE ➤					

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Schedule D

Capital Gains and Losses

${\bf Part\ I-Short\text{-}Term\ Capital\ Gains\ and\ Losses-Assets\ Held\ \ One\ Year\ or\ Less}$

(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sale price (see Instructions)	(e) Cost or other bas (see Instructions)		(f) Gain (or loss) (col. (d) less (e))			
1										
2	Short-term capital gain from insta	allment sales from fe	deral Form 6252			2				
3	Short-term capital loss carryover					3				
_			->			_				
4	4 Net short-term gain (or loss) (combine lines 1 through 3)									
Part II	art II — Long-Term Capital Gains and Losses — Assets Held More Than One Year									
5										
6	Long-term capital gain from insta	allment sales from Fo	rm N-171			6				
7	Capital gain distributions	7								
8	Enter gain, if applicable, from Sc				ŀ	8				
9	Long-term capital loss carryover					9				
10	Net long-term gain (or loss) (con	nbine lines 5 through	9)			10				
Part III	I — Summary of Parts I and	II								
	,				1		Г			
44	Cambina lines 4 and 40 and an		> h			44				
11	Combine lines 4 and 10, and ent	ter the net gain (or io	ss) nere			11				
12	If line 11 is a gain, enter here and also on line 3, Section I (page 1)									
13	If line 11 is a loss, enter here an	12								
	a The amount on line 11; or									
	· · · · · · · · · · · · · · · · · · ·	13								
Part I\	b \$3,000									
(Complete this part if the loss on line 11 is more than the loss on line 13.)										
14	Enter loss shown on line 4; if no	ne, enter zero and sk	ip lines 15 through 18	3		14				
						15				
15	5 Enter gain shown on line 10. If that line is a blank or shows a loss, enter zero									
16	16 Subtract line 15 from line 14									
10										
17	17 Enter the smaller of line 13 or 16									
						17				
18	Subtract line 17 from line 16. Th	nis is your short-term	capital loss carryo	ver from 1995 to 1996		18				
		·								
19	Enter loss from line 10; if none, e	19								
20	20 Enter gain shown on line 4. If that line is blank or shows a loss, enter zero									
21	Subtract line 20 from line 19					21				
22	Subtract line 17 from line 13. (N	22								
23	Subtract line 22 from line 21. This is your long-term capital loss carryover from 1995 to 1996									
		23								

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Desig	nation of Tax	x Matters Person								
Name		idual holder designate	ed as the tax matters	person (TMP) fo	lo	calendar year of this lentifying umber of TMP	return:			
Addre design	ss of hated TMP	-								
Addit	ional Informa	ation								
G H I	Number of res Enter the amo Check this bo If so, attach a	sidual holders in this Fount of tax-exempt into ox if the REMIC has many schedule identifying to of the daily accruals	REMIC > erest accrued during ore than one class of the classes and princ	the year >f regular interests	s	Jing for each at the e	> and of the			
Sc	hedule L	Balance Sheets			(a) Beginning of yea	ır	(b)	End of year	
1 a		Assets estments (see Instruction estments								
b	Qualified rese	erve assets								
С	Foreclosure p	property								
2	Qualified mor	tgages								
3	Other assets	(attach schedule)								
4	Total assets.									
5	Current liabilit	Liabilities and C ties (attach schedule)	•							
6	Other liabilitie	es (attach schedule)								
7	Regular intere	ests in REMIC								
8	Residual hold	lers' capital accounts								
9		s and capital								
Scl	nedule M	Reconciliation of F (Show reconciliation of		•		arterly on Schedule	Q (Forn	n N-66), Item	n E.)	
ca	Residual holders' pital accounts at eginning of year	(b) Capital contributed during year	(c) Taxable income (net loss) from Section I, line 15	(d) Nontaxable income		(e) Unallowable deductions		ndrawals and stributions	(g) Residual ho capital accounts a year (combine or through (f))	at end of ols. (a)